

# **SCHEDULE A (FEC Form 3 )** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 35 / 84

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

WALSH FOR CONGRESS COMMITTEE

<b>A.</b> Full Name (Last, First, Middle Initial) Gary Bobbett Mailing Address 115 North Geddes St. City State Zip Code Syracuse NY 13204 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Kimbers Occupation Executive Receipt For: 2006 Election Cycle-to-Date ▼ <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 500.00		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 0 / 2 0 0 6 <b>Transaction ID:</b> C-246-011E04 Amount of Each Receipt this Period 500.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>B.</b> Full Name (Last, First, Middle Initial) Roy J. Bostock Mailing Address 7 South Manursing Island City State Zip Code Rye NY 10580 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer THE PARTNERSHIP FOR A DRUG-FREE AMERI Occupation CHAIRMAN Receipt For: 2006 Election Cycle-to-Date ▼ <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 1000.00		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 3 0 / 2 0 0 6 <b>Transaction ID:</b> C-268-05dt01 Amount of Each Receipt this Period 1000.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>C.</b> Full Name (Last, First, Middle Initial) Bruce W. Boyea Mailing Address 15 Campbell Road Court City State Zip Code Binghamton NY 13905 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Security Mutual Life Insurance Compan Occupation CEO Receipt For: 2006 Election Cycle-to-Date ▼ <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 250.00		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 7 / 2 0 0 6 <b>Transaction ID:</b> C-278-05eO01 Amount of Each Receipt this Period 250.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) .....

1750.00

**TOTAL** This Period (last page this line number only) .....